Application Data Sheet

Application Information

Application number::

Filing Date::

Application Type::   Regular

Subject Matter::   Utility

Suggested classification::

Suggested Group Art Unit::

CD-ROM or CD-R??::

Number of CD disks::

Number of copies of CDs::

Sequence Submission::

Computer Readable Form (CRF)?::

Number of copies of CRF::

Title::   METHOD AND SYSTEM FOR BI-DIRECTIONAL
                                          PATH SWITCHED NETWORK

Attorney Docket Number::   014940-001910US

Request for Early Publication::   No

Request for Non-Publication::   No

Suggested Drawing Figure::

Total Drawing Sheets::   38

Small Entity?::   No

Latin name::

Variety denomination name::

Petition included?::   No

Petition Type::

Licensed US Govt. Agency::

Contract or Grant Numbers One::

Secrecy Order in Parent Appl.::   No

Applicant Information

Applicant Authority Type::   Inventor

Primary Citizenship Country::   India

Status::   Full Capacity

Given Name::   Sridhar

Middle Name::

Family Name::   Alagar

Name Suffix::

City of Residence::   Sunnyvale

State or Province of Residence::

Country of Residence::

Street of Mailing Address::   533 Hyannis Drive

City of Mailing Address::   Sunnyvale

State or Province of mailing address::

Country of mailing address::

Postal or Zip Code of mailing address:: 94087

Applicant Authority Type::   Inventor

Primary Citizenship Country::   US

Status::   Full Capacity

Given Name::   Brian

Middle Name::

Family Name::   Pheiffer

City of Residence::   Santa Jose

State or Province of Residence::   CA

Country of Residence::   US

Street of Mailing Address::   2219 Canyon Cliff Court

City of Mailing Address::   Santa Jose

State or Province of mailing address::   CA

Postal or Zip Code of mailing address:: 95138

     Initial 11/6/01

Applicant Authority Type::   Inventor
Primary Citizenship Country::   India
Status::   Full Capacity
Given Name::   Rohit
Middle Name::
Family Name::   Sharma
Name Suffix::
City of Residence::   Sunnyvale
State or Province of Residence::   CA
Country of Residence::   US
Street of Mailing Address::   970 Corte Madera Avenue #312
City of Mailing Address::   Sunnyvale
State or Province of mailing address:: CA
Country of mailing address::
Postal or Zip Code of mailing address:: 94086

Applicant Authority Type::   Inventor
Primary Citizenship Country::   Canada
Status::   Full Capacity
Given Name::   Stephane
Family Name::   St. Laurent
City of Residence::   Santa Clara
State or Province of Residence::   CA
Country of Residence::   US
Street of Mailing Address::   2339 Lass Drive
City of Mailing Address::   Santa Clara
State or Province of mailing address:: CA
Postal or Zip Code of mailing address:: 95054

Applicant Authority Type::   Inventor

Primary Citizenship Country::   US

Status::   Full Capacity

Given Name::   Holden

Family Name::   Jessup

Name Suffix::

City of Residence::   Palo Alto

State or Province of Residence::   CA

Country of Residence::   US

Street of Mailing Address::   893 Colorado Avenue

City of Mailing Address::   Palo Alto

State or Province of mailing address::   CA

Country of mailing address::

Postal or Zip Code of mailing address::   94303

Applicant Authority Type::   Inventor

Primary Citizenship Country::   Canada

Status::   Full Capacity

Given Name::   Rainer

Middle Name::

Family Name::   Iraschko

City of Residence::   Sunnyvale

State or Province of Residence::   CA

Country of Residence::   US

Street of Mailing Address::   705 San Conrado Terrace, Apt. 3

City of Mailing Address::   Sunnyvale

State or Province of mailing address::   CA

Postal or Zip Code of mailing address::   94087

Correspondence Information

Correspondence Customer Number::   20350

Representative Information

Representative Designation::	Representative Number::	Representative Name::
Primary	28,572	David N. Slone
Associate	39,315	Horace Ng

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	Non-Provisional of	60/246,675	11/07/00

Foreign Priority Information

Country::	Application number::	Filing Date::

Assignee Information

Assignee Name::	ONI Systems Corp.
Street of mailing address::	5965 Silver Creek Valley Road
City of mailing address::	San Jose
State or Province of mailing address::	California
Country of mailing address::	US
Postal or Zip Code of mailing address::	95138